2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N08552

Entity Name: VILLAGE OF DORAL WOODS ASSOCIATION, INC.

FILED May 07, 2019 **Secretary of State** 0867505116CC

Current Principal Place of Business:

UNLIMITED PROPERTY MANAGEMENT, LLC **7665 NW 50 STREET** MIAMI, FL 33166

Current Mailing Address:

UNLIMITED PROPERTY MANAGEMENT, LLC. 7665 NW 50 STREET MIAMI, FL 33166 US

FEI Number: 59-2644297 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNLIMITED PROPERTY MANAGEMENT, LLC. 7665 NW 50 STREET MIAMI, FL 33166 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: UNLIMITED PROPERTY MANAGEMENT, LLC. 05/07/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title PD Title **VPD**

RIVAS. ANDRES Name Name AMORE, ITALO **7665 NW 50 STREET** Address Address **7665 NW 50 STREET**

City-State-Zip: MIAMI FL 33166 City-State-Zip: MIAMI FL 33166

Title SD Title TD

Name SANCHO, JANET Name CANDAN, FLORDELIZA Address **7665 NW 50 STREET** Address **7665 NW 50 STREET** City-State-Zip: MIAMI FL 33166

Title Title D

YANNUZZI, MARIA DEL ROSARIO Name Name PINA, ARACELI Address **7665 NW 50 STREET**

7665 NW 50 STREET City-State-Zip: MIAMI FL 33166 City-State-Zip: MIAMI FL 33166

Title D

City-State-Zip:

Address

LUTZ, JAMES Name

Address 7665 NW 50 STREET City-State-Zip: MIAMI FL 33166

MIAMI FL 33166

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

05/07/2019 SIGNATURE: ANDRES RIVAS **PRESIDENT**